55783-2

New York State

Division of Substance Abuse Services

Preliminary Report

DRUG USE AMONG NEW YORK STATE'S HOUSEHOLD POPULATION

September 1981

New York State
Division of Substance Abuse Services

Preliminary Report

Drug Use Among New York State's Household Population

EXECUTIVE SUMMARY

In the spring of 1981, the New York State Division of Substance Abuse Services conducted a major survey of drug use among the state's household population, aged 12 and older. A random sample of almost 3,500 residents responded to a telephone survey that probed the use of illicit drugs and prescription drugs taken medically as well as nonmedically.* The sample was then projected to reflect drug use among an estimated 14.3 million household residents in the state. As in similar surveys of self-reported substance use, the findings must be considered low estimates of the actual numbers of users.

The findings presented in this report focus on the nonmedical use of drugs. These findings must be viewed as preliminary since detailed census data were not available at the time of writing. The detailed census data will provide more precise estimates of substance use, but will not change the magnitude of the findings reported.

Major Findings

Drug use is widespread among New York State's household population.

- More than 2,000,000 residents have recently (in the six months prior to the survey) used one or more illicit drugs and/or prescription drugs nonmedically.

- Of these, 358,000 residents are considered to be serious abusers of drugs** -- many of whom have used seven or more drugs in the six months prior to the survey.

- The drugs most frequently used in the six months prior to the survey are:

Marijuana	1,724,000	household	residents
Stimulants	481,000	household	residents
Cocaine	477,000	household	residents
Sedatives	182,000	household	residents
Tranquilizers	172,000	household	residents
Analgesics	110,000	household	residents

*Refers to the acquisition of drugs through means other than one's own prescription, or the use of drugs in amounts beyond those medically prescribed or for purposes other than prescribed.

**Defined as substantial and extensive users on pages 12-13.

- Many residents combine drugs in a way that two or more different* drugs, or drugs and alcohol, affect the person at the same time. Popular combinations used recently include:

Marijuana and Alcohol	1,352,000	household	residents
Cocaine and Marijuana	325,000	household	residents
Cocaine and Alcohol	264,000	household	residents
Marijuana, Alcohol and a Third Drug	249,000	household	residents
Stimulants and Alcohol	203,000	household	residents

- Many residents have initiated drug use in the past year. Drugs that attract the largest number of new users include:

Stimulants	271,000	household	residents
Marijuana	241,000	household	residents
Cocaine	185,000	household	residents
Cough Medicine with Codeine	85,000	household	residents

- The trend over the past five years shows that by 1981 a larger proportion of the state's household residents have used illicit substances and/or prescription drugs nonmedically. The most important increases are found in the recent use of the following drugs:

	1975/1976 N = 13,690,000 (14 years and older)		1981 N = 13,676,000 (14 years and older)	
	N	%	N	%
Marijuana	1,408,000	10	1,704,000	12
Stimulants	142,000	1	477,000	4
Cocaine	135,000	1	473,000	3

Population Characteristics Associated with Drug Use

Drug use varies somewhat by population characteristics:

- Young adults, aged 18 through 24, tend to have the highest rates of drug use, followed by adults aged 25 through 34.
- Men generally are involved in more serious forms of drug use than women.
- Whites, blacks and Hispanics all have similar drug use rates.
- Among the income groups, residents with household incomes of $50,000 or more have the highest drug use rates in the state. Six percent (51,000) of these residents are considered serious abusers of drugs.

*"Different" is defined in terms of pharmacological classifications.

- New York City, Suburban New York City*, and Upstate Urban Counties** have the same proportion of serious drug abusers--three percent of the population. The remaining counties have a somewhat smaller problem--two percent of their residents are serious drug abusers.

Problems Associated with Drug Use

- About 1,024,000 state residents (seven percent) have experienced problems in one or more areas of life as a result of using drugs:
  - .. 618,000 experienced problems in work or school;
  - .. 565,000 experienced problems with family and/or friends;
  - .. 443,000 experienced health problems.
- Approximately 729,000 people (six percent) have driven an automobile in the past six months while feeling the effects of a drug(s) used nonmedically; 58,000 report having had auto accidents while driving under the influence of drugs.

Perceptions of Drug Dependence

- About 288,000 state residents (two percent) see themselves as dependent or using too much of some illicit substance and/or prescription drug used nonmedically.
- Marijuana is mentioned most frequently as the drug of dependence.

Seeking Treatment

- Of the 111,000 household residents who report receiving treatment for their drug abuse:
  - .. 38 percent went to drug treatment programs;
  - .. 34 percent went to mental health clinics or hospitals;

*Nassau, Suffolk, Westchester and Rockland Counties.
**Albany, Erie, Monroe and Onondaga Counties.

- 13 percent went to private doctors or other private professionals;
- 3 percent went to self-help groups;
- 12 percent went to a variety of other treatment settings.

- Of those who had not sought treatment, a majority indicated that if they were to seek treatment, they would prefer to receive it from a personal physician or other private practice professional.

TABLE OF CONTENTS

Page

Executive Summary..... i

Introduction..... 1

I. Background of the Survey..... 1

II. Major Survey Findings..... 3

A. Prevalence of Substance Use (Table 1 and 2)..... 3
B. Polydrug Use (Table 3)..... 7
C. New Substance Use (Table 4)..... 9
D. Substance Use Hierarchy (Table 5)..... 12
E. Trends in Substance Use..... 15

III. Characteristics of Drug Users..... 17

A. Drug Use by Age (Tables 6 and 7)..... 17
B. Drug Use by Sex..... 22
C. Drug Use by Ethnicity..... 23
D. Drug Use by Employment Status and Income..... 25
E. Drug Use by Region in the State (Tables 8 through 12)..... 27

IV. Drug Use and Problems..... 36

A. Problems Associated with Drug Use (Table 13)..... 36
B. Perceptions of Drug Dependence..... 39
C. Seeking Treatment..... 40

Appendix..... 42

A. Methodology..... 42
B. Limitations of the Data..... 44

Preliminary Report

Drug Use Among New York State's Household Population

Introduction

The nonmedical use of drugs is widespread among New York State residents. A 1981 survey found that of the more than 14 million state residents, aged 12 and older, about 2,000,000 used one or more illicit drugs and/or prescription drugs nonmedically* in the past six months. Approximately 358,000 residents are considered serious abusers of drugs -- a preponderance of whom have used seven or more drugs in the six months prior to the survey.

In the spring of 1981, the New York State Division of Substance Abuse Services conducted a survey of drug use among the state's household population. Almost 3,500 randomly selected household residents of New York State participated in the telephone survey; the results were projected to the state's estimated household population of 14,256,000, aged 12 and older. The sections that follow detail the background of the survey, the prevalence and incidence of drug use, the characteristics of drug abusers, and the self-reported problems associated with drug use.

The findings must be viewed as preliminary since detailed census data for the appropriate weighting of the random sample were not available at the time of writing. The detailed census data will provide more precise estimates of substance use, but will not change the magnitude of the findings reported here.

I. Background of the Survey

The New York State Division of Substance Abuse Services periodically surveys the household population as part of a continual monitoring of the drug abuse problem within the state. The last major household survey was conducted

---

*Refers to the acquisition of drugs through means other than one's own prescription, or the use of drugs in amounts beyond those medically prescribed or for purposes other than prescribed.

in the winter of 1975/1976. Information drawn from these studies enables the agency to determine the need for services and to plan more effective treatment, prevention and education programs. Furthermore, the surveys elicit detailed information that is not ordinarily available about a relatively clandestine phenomenon. Finally, since the survey reaches the household population, it yields estimates about a kind of drug use which does not usually come to the attention of public health or law enforcement officials.

The 1981 survey had several goals. Similar to the previous survey, the primary goal was to measure the prevalence and incidence of drug use among New York State's household residents. Specifically, the survey inquired about the drugs being used, the frequency and recency of use, and the demographic characteristics of the people who use them. Those characteristics include age, sex, ethnic background, income, employment status and where users live in the state.

A second goal of the 1981 survey was to assess the extent of physical, psychological, social and/or legal problems associated with drug use, such as problems related to family and job. Specific attention was given to the use of drugs and driving. A third goal was to determine the extent to which drug users have sought treatment, and the types of treatment services they would prefer.

Unlike previous household surveys that used face-to-face interviewing, the 1981 survey was conducted from a central location using telephones to reach a sample of New York State households. This innovative survey strategy had been carefully evaluated and was selected after a pilot study demonstrated its feasibility. In addition to the cost savings, the telephone technique facilitated the survey process and the analysis of data. Appended sections describe the special methodology used in the survey and the particular limitations of the study.

II. Major Survey Findings

This part of the report highlights the findings of the survey. The sections included describe the prevalence of specific drug use and combinational drug use, the extent of new use, the levels of substance abuse and the trend of drug use in New York State in the past five years.

A. Prevalence of Substance Use (Tables 1 and 2)*

Marijuana, stimulants** and cocaine are the most widely used drugs among the household population in New York State. Use of other drugs for nonmedical purposes is comparatively small.

Twenty-seven percent of the state's population have tried marijuana at least once. Twelve percent of the state residents have used marijuana within six months of the survey and three quarters of these (or nine percent of the state's residents) have used marijuana within 30 days of the survey. The general pattern among current users (i.e., residents who have used marijuana within 30 days of the survey) is one of repeated use. Almost 36 percent of those who have used marijuana within the 30 days prior to the survey have used marijuana on at least 10 of these 30 days, and more than 50 percent of the current users have smoked marijuana on two to nine days in the month prior to the survey.

---

*Tables present the estimated numbers and percentages of residents using various drugs; the text refers to percentages only, unless indicated otherwise.
**Although several of the drugs under discussion may be used medically (e.g., tranquilizers, sedatives and stimulants), this selection deals with nonmedical use--use other than according to a physician's direction.

DIVISION OF SUBSTANCE ABUSE SERVICES
Table 1. SUBSTANCE ABUSE AMONG THE HOUSEHOLD POPULATION IN NEW YORK STATE
14,256,000 Household Residents - Spring 1981

Type of Substance[a]	Never Used		Lifetime Use (Used at Least Once)		Response Unknown	Recent Use (Used in Past Six Months)		Current Use (Used in Past 30 Days)	
	N	%	N	%	N	N	%	N	%
Marijuana	10,432,000	73	3,800,000	27	24,000	1,724,000	12	1,287,000	9
Cocaine	13,488,000	95	762,000	5	6,000	477,000	3	256,000	2
PCP (Angel Dust)	14,074,000	99	176,000	1	6,000	21,000	*%	9,000	*%
Hallucinogens	13,819,000	97	425,000	3	12,000	85,000	1	39,000	*%
Inhalants	13,999,000	98	257,000	2	**	64,000	*%	40,000	*%
Heroin	14,113,000	99	140,000	1	3,000	28,000	*%	25,000	*%
Methadone (Illicit)	14,193,000	99	63,000	*%	**	12,000	*%	1,000	*%
Tranquilizers[b]	13,763,000	96	493,000	4	**	172,000	1	87,000	1
Sedatives[b]	13,762,000	97	484,000	3	10,000	182,000	1	112,000	1
Stimulants[b]	13,222,000	93	1,030,000	7	4,000	481,000	3	301,000	2
Anti-Depressants[b]	14,202,000	99	54,000	*%	**	32,000	*%	28,000	*%
Analgesics[b]	13,826,000	97	388,000	3	42,000	110,000	1	59,000	*%
Cough Medicine with Codeine[b]	13,700,000	96	545,000	4	11,000	98,000	1	2,000	*%

Example of How to Read the Table: Among responding household residents, 3,800,000 or 27% have used marijuana at least once.

Note: The numbers reported in the table are low estimates since they do not include the non-respondents.

*% Less than 0.5%. ** Less than 500.

[a]Hallucinogens such as LSD, mescaline and psilocybin; inhalants such as glue/solvents, sprays, nitrous oxide and Amyl Nitrite; tranquilizers such as Valium and Librium; sedatives such as barbiturates and methaqualone; stimulants such as amphetamines and diet pills; anti-depressants such as Elavil and Imipramine; analgesics such as Demerol and Darvon.

[b]Refers only to the nonmedical use of prescription drugs, defined as use other than according to a physician's direction (i.e., in amounts beyond the prescribed dose and/or obtained from a nonmedical source).

DIVISION OF SUBSTANCE ABUSE SERVICES

Table 2. FREQUENCY OF CURRENT SUBSTANCE ABUSE AMONG THE HOUSEHOLD POPULATION IN NEW YORK STATE
14,266,000 Household Residents - Spring 1981

Type of Substance[a]	Current Use (Used in Past 30 Days)		Used Once		Used 2-3 Days		Used 4-9 Days		Used 10+ Days		Used, Frequency Unknown
	N	%	N	%	N	%	N	%	N	%	N
Marijuana	1,287,000	9	189,000	1	330,000	3	304,000	2	461,000	3	3,000
Cocaine	256,000	2	126,000	1	62,000	*%	36,000	*%	29,000	*%	3,000
PCP (Angel Dust)	9,000	*%	2,000	*%	4,000	*%	**	*%	3,000	*%	**
Hallucinogens	39,000	*%	15,000	*%	17,000	*%	7,000	*%	**	*%	**
Inhalants	40,000	*%	30,000	*%	1,000	*%	5,000	*%	4,000	*%	**
Heroin	25,000	*%	**	*%	12,000	*%	**	*%	13,000	*%	**
Methadone (Illicit)	1,000	*%	**	*%	**	*%	**	*%	**	*%	**
Tranquilizers[b]	87,000	1	20,000	*%	31,000	*%	23,000	*%	13,000	*%	**
Sedatives[b]	112,000	1	36,000	*%	30,000	*%	29,000	*%	9,000	*%	8,000
Stimulants[b]	301,000	2	111,000	1	71,000	*%	72,000	*%	44,000	*%	3,000
Anti-Depressants[b]	28,000	*%	**	*%	**	*%	**	*%	**	*%	28,000
Analgesics[b]	59,000	*%	35,000	*%	14,000	*%	1,000	*%	9,000	*%	**
Cough Medicine with Codeine[b]	2,000	*%	**	*%	1,000	*%	**	*%	**	*%	**

Example of How to Read the Table: Among responding household residents, 189,000 or 1% have used marijuana once in the past thirty days.

Note: The numbers reported in the table are low estimates since they do not include the non-respondents.

*% Less than 0.5%. **Less than 500.

[a]Hallucinogens such as LSD, mescaline and psilocybin; inhalants such as glue/solvents, sprays, nitrous oxide, and Amyl Nitrite; tranquilizers such as Valium and Librium; sedatives such as barbiturates and methaqualone; stimulants such as amphetamines and diet pills; anti-depressants such as Elavil and Imipramine; analgesics such as Demerol and Darvon.

[b]Refers only to the nonmedical use of prescription drugs, defined as use other than according to a physician's direction (i.e., in amounts beyond the prescribed dose and/or obtained from a nonmedical source).

Seven percent of New York State residents have used stimulants for nonmedical purposes. Three percent of the residents have used stimulants within six months of the survey and two percent of the state's residents have used stimulants within 30 days of the survey. The general pattern in the frequency of stimulant use for current users is that stimulants are used occasionally, more likely to be used once or a few times and less likely to be used frequently within the 30 days prior to the survey.

Five percent of the state residents have used cocaine at least once, and most of these users (three percent of the population) have used cocaine in the past six months. Two percent have used cocaine within 30 days of the survey. Analysis of the frequency of cocaine use among residents who have used the drug within 30 days of the survey shows a general pattern of use similar to that of stimulant use. Cocaine is a drug that is used occasionally, more likely to be used once or a few times and less likely to be used repeatedly within the 30 days prior to the survey.

Nonmedical use of other drugs among state residents is comparatively small. Less than five percent of the state's population have nonmedically used any of the other drugs. Hallucinogens, tranquilizers, sedatives, analgesics, and cough medicine with codeine were each used by one percent of the household population within six months of the survey, and tranquilizers and sedatives were each used by one percent of the population within 30 days of the survey. Less than one percent of household residents report having used PCP, inhalants, heroin, illicit methadone, or anti-depressants within the past six months.

B. Polydrug Use (Table 3)

Substances can be used singly or in combination; i.e., two or more drugs, or drugs and alcohol, can be used together so that they affect the individual at the same time. The effects of one or more substances may modify or amplify the effects of the other. This practice of mixing drugs has become increasingly more common, and there are many mental and physical health risks associated with using drugs in combination. For example, the majority of drug-related emergency room episodes involve more than one drug.*

The substances most often used in combination by New York State householders are alcohol, marijuana and cocaine, the substances that are particularly popular among household residents. Of the 22 combinations listed in the questionnaire, the use of alcohol with marijuana is clearly most common. During the six months prior to the survey, nine percent of New York State residents have taken marijuana together with alcoholic drinks (1,352,000). Use of other drugs together with alcohol is less common; two percent of the population have taken cocaine and alcohol (264,000), and one percent each stimulants and alcohol (203,000) and sedatives/tranquilizers and alcohol (129,000). The high prevalence of marijuana use, as well as the widespread use of alcohol, contributes to the combined use of these substances with a third drug, found in a total of 249,000 residents or two percent of the household population.

Simultaneous use of marijuana with other drugs also involves about one to two percent of the population. Use of cocaine with marijuana is more widespread (325,000 users or two percent) than use of stimulants with marijuana (192,000 users or one percent) or use of sedatives/tranquilizers with marijuana (111,000 or one percent).

*Project DAWN, Annual Report, 1979.

DIVISION OF SUBSTANCE ABUSE SERVICES
Table 3. RECENT USE[a] OF COMBINATIONS OF SUBSTANCES AMONG HOUSEHOLD RESIDENTS IN NEW YORK STATE
14,256,000 Household Residents - Spring 1981

Combinations[b] of Substances[c]	Total	
	N	%
Marijuana and Alcohol	1,352,000	9
Cocaine and Marijuana	325,000	2
Stimulants[d] and Marijuana	192,000	1
Sedatives/Tranquilizers[d] and Marijuana	111,000	1
Cocaine and Alcohol	264,000	2
Stimulants[d] and Alcohol	203,000	1
Sedatives/Tranquilizers[d] and Alcohol	129,000	1
Marijuana and Alcohol and a Third Drug	249,000	2
Other Combinations	261,000	2

Example of How to Read the Table: Among responding household residents, 1,352,000 or 9% have used marijuana and alcohol in the six months prior to the survey.

Note: The numbers reported in the table are low estimates since they do not include the non-respondents.

*% Less than 0.5 %. ** Less than 500.

[a]Recent use refers to use in the six months prior to the survey.
[b]Refers to the use of two or more substances together with the result that they affect the person at the same time.
[c]Hallucinogens such as LSD, mescaline and psilocybin; inhalants such as glue/solvents, sprays, nitrous oxide and Amyl Nitrite; tranquilizers such as Valium and Librium; sedatives such as barbiturates and methaqualone; stimulants such as amphetamines and diet pills; anti-depressants such as Elavil and Imipramine; analgesics such as Demerol and Darvon.
[d]Refers only to the nonmedical use of prescription drugs, defined as use other than according to a physician's direction (i.e., in amounts beyond the prescribed dose and/or obtained from a nonmedical source).

With the exception of the combinational use of marijuana and alcohol, these six months prevalence rates appear to be low. However, a more adequate reflection of the extent of combinational use is given by figures for selected age groups. Young adults, aged 18 through 24 are among those most involved in combinational use.*

While this household survey did not address motivational aspects of combinational use, a previous survey indicates that users either combine drugs to reduce or enhance the effects experienced from one substance, or simply take several substances together because they are readily available, as in the case of alcohol and marijuana.**

C. New Substance Use (Table 4)

New substance use, or incidence, indicates the extent to which drug use is spreading in a population. For the purpose of this study, incidence is defined as the number of residents in New York State who have started using a given drug between January 1980 (somewhat more than a year prior to the survey) and the date of the survey. The number of new users, therefore, gives some indication of the spread of drug use in the household population in New York State.

---

*See the discussion of age and drug use in Section III. Characteristics of Drug Users.

**New York State Division of Substance Abuse Services, "Polydrug Use Among the New York State Household Population," December 1979.

DIVISION OF SUBSTANCE ABUSE SERVICES

Table 4. NEW SUBSTANCE USE, SINCE JANUARY 1980, AMONG THE HOUSEHOLD POPULATION IN NEW YORK STATE
14,266,000 Household Residents - Spring 1981

Type of Substance[a]	Total	
	N	%
Marijuana	241,000	2
Cocaine	185,000	1
PCP (Angel Dust)	34,000	*%
Hallucinogens	48,000	*%
Inhalants	38,000	*%
Heroin	10,000	*%
Methadone (Illicit)	3,000	*%
Tranquilizers[b]	71,000	1
Sedatives[b]	62,000	*%
Stimulants[b]	271,000	2
Anti-Depressants[b]	6,000	*%
Analgesics[b]	83,000	1
Cough Medicine[b] with Codeine	85,000	1

Example of How to Read the Table: Among responding household residents 241,000 or 2% have started using marijuana since January 1980.

Note: The numbers reported in the table are low estimates since they do not include the non-respondents.

[a]Hallucinogens such as LSD, mescaline and psilocybin; inhalants such as glue/solvents, sprays, nitrous oxide, and Amyl Nitrite; tranquilizers such as Valium and Librium; sedatives such as barbiturates and methaqualone; stimulants such as asphetamines and diet pills; anti-depressants such as Elavil and Imipramine; analgesics such as Demerol or Darvon.

[b]Refers only to the nonmedical use of prescription drugs defined as use other than according to a physician's direction (i.e., in amounts beyond the prescribed dose and/or obtained from a nonmedical source).

A major finding of the study is that stimulants attracted the largest number of new users. Statewide, an estimated 271,000 residents (two percent) are new users of stimulants. A substantial spread in stimulant use is indicated; more than one out of every four residents who had ever used stimulants for nonmedical purposes is a new user.

The number of marijuana users in New York State increased by an estimated 241,000 new users (two percent). Six out of every one hundred residents who ever used marijuana are new marijuana users.

The nonmedical use of cocaine increased by an estimated 185,000 new cocaine users in the state's population (one percent). At the time of the survey, close to one out of every four residents who had tried cocaine was a new user.

The nonmedical use of tranquilizers, analgesics, and cough medicine with codeine each increased by one percent in the state's population. It is noteworthy, though, that 21 percent of analgesic users, 16 percent of cough medicine with codeine users, and 14 percent of tranquilizer users had started use of the substance in the past year.

Increases in the use of PCP, hallucinogens, inhalants, methadone (illicit), sedatives and anti-depressants among New York State residents is less than one percent. There is no indication of a significant spread in the use of these drugs.

The great difficulties in measuring heroin use in a household survey are noted in the appendix. No statement can be made from these data as to whether heroin use is increasing in the state population. Other data, however, clearly indicate a marked increase in heroin use during the period 1978 to the present.

D. Substance Use Hierarchy (Table 5)

In order to summarize substance use among state residents and to determine the probable need for services*, a hierarchy was devised that reflects the seriousness and recency of nonmedical drug use. (The hierarchy does not include medical use of various drugs.) The criteria used to assign each person to one level of the hierarchy are listed below:

No Use	-	those who have never used drugs nonmedically.
Prior Use	-	those who have not used any drugs during the six months prior to the survey, but used at least one drug prior to that time.
Infrequent Use	-	those who have used one or two different drugs between September 1980 and spring 1981, the time of the survey.
Regular Use	-	those who have used three to six different drugs since September 1980, or
		those who have used marijuana ten to 39 times during the past month.
Substantial Use	-	those who have used seven to nine drugs since September, or
	-	those who have used marijuana 40 times or more during the past month, or
	-	those who have used heroin or "street" methadone four to 19 times during the past month, or
	-	those who have used some other drug four to 39 times during the past month.

*See section IV. C. Seeking Treatment.

Extensive Use

- those who have used ten or more different drugs since September, or
- those who have used heroin or "street" methadone 20 or more times during the past month, or
- those who have used some other drug 40 or more times during the past month.

The higher the category in which the person is placed, ranging from no use to extensive use, the more likely the person is to have used many drugs and to have used them frequently during the past month.

Although fewer than one in every hundred residents are extensive users (109,000), six in every hundred are regular or substantial users (767,000). Over one million state residents (eight percent) are infrequent users, taking, for example, marijuana twice a week or less often and using at most one other drug nonmedically. The largest group of users, however, are those who have taken drugs in the past but who have discontinued their nonmedical drug use at least six months prior to the survey. There are over two million prior users in the state (17 percent of the population), slightly exceeding the number of recent users. Finally, there are 68 percent of the population who have never used drugs nonmedically. Characteristics of active users, prior users and nonusers will be discussed in the following section.

DIVISION OF SUBSTANCE ABUSE SERVICES

Table 6. LEVEL OF SUBSTANCE USE[a] AMONG THE HOUSEHOLD POPULATION IN NEW YORK STATE
14,256,000 Household Residents - Spring 1981

Level of Use	N	%
Total	14,256,000	100
No Use	9,766,000	68
Prior Use	2,413,000	17
Infrequent Use	1,201,000	8
Regular Use	518,000	4
Substantial Use	249,000	2
Extensive Use	109,000	1

Example of How to Read the Table: Among responding household residents 2,413,000 or 17% are prior users.

*% Less than 0.5%. ** Less than 500.

[a]Level of substance use or substance use hierarchy is a classification of household residents which reflects the history and recency of drug use as well as the extent and frequency of use (see detailed explanations, p.12').

E. Trends in Substance Use

In the five years since the last household survey was conducted by the New York State Division of Substance Abuse Services, a larger proportion of the state's household residents have used illicit substances and/or prescription drugs nonmedically. The table below shows the comparison of lifetime use for comparable drug categories for the population aged 14 and older.*

Lifetime Use

Type of Substance	1975/1976 N = 13,690,000 (14 years and older) N	%	1981 N = 13,676,000 (14 years and older) N	%
Marijuana	2,483,000	18	3,774,000	28
Cocaine	396,000	3	758,000	6
Hallucinogens	488,000	4	470,000	3
Inhalants	215,000	2	251,000	2
Heroin	133,000	1	140,000	1
Tranquilizers	525,000	4	489,000	4
Sedatives	455,000	3	480,000	3
Stimulants	645,000	5	1,024,000	8
Analgesics	633,000	5	379,000	3
Cough Medicine with Codeine	467,000	3	532,000	4

*The ages of the target populations for the two surveys were slightly different --14 years and older for 1975/1976 and 12 years and older for 1981. For the sake of comparability, however, the data presented here are for those aged 14 and older for both surveys. Therefore, these 1981 data differ from data presented in other parts of the report which refer to the population aged 12 and older.

In the past five years, the most dramatic increases are found in the lifetime use of marijuana (18 percent vs. 28 percent), cocaine (three percent vs. six percent), and stimulants used nonmedically (five percent vs. eight percent). Interestingly, a decline is seen in the nonmedical use of analgesics (five percent vs. three percent). Use rates for the other drugs have essentially remained unchanged.

A comparison of drug use in the recent past (i.e., within the six months prior to the surveys) for the 1975/76 and 1981 time points finds that use rates have either risen or remained the same for each drug or drug category. The table below shows the comparison in recent use.

Recent Use
(Use in the Past Six Months)

	1975/1976 N = 13,690,000 (14 years and older)		1981 N = 13,676,000 (14 years and older)	
Type of Substance	N	%	N	%
Marijuana	1,408,000	10	1,704,000	12
Cocaine	135,000	1	473,000	3
Hallucinogens	78,000	1	85,000	1
Inhalants	35,000	*%	57,000	*%
Heroin	18,000	*%	28,000	*%
Tranquilizers	148,000	1	168,000	1
Sedatives	97,000	1	178,000	1
Stimulants	142,000	1	477,000	4
Analgesics	88,000	*%	101,000	1
Cough Medicine with codeine	43,000	*%	94,000	1

Similar to the pattern in lifetime use, the most dramatic increases are found in the recent use of marijuana (10 percent vs. 12 percent), cocaine (one percent vs. three percent), and stimulants used nonmedically (one percent vs. four percent).

*% less than 0.5%.

III. Characteristics of Drug Users

Drug use has spread to an extent that it affects persons from almost all subgroups of the population, young and old, rich and poor, people in central cities as well as in the country, whites and non-whites, those working as well as those not employed. While there are differences in the various aspects of drug use among some of these subgroups which will be highlighted below, the similarities are becoming more pervasive and differences tend to disappear. Perhaps the most significant differences with widereaching consequences are found between the generations. These will be discussed first.

A. Drug Use by Age (Tables 6 and 7)

Whichever aspect of drug use and abuse is considered, young adults (aged 18 through 24) tend to have the highest rates of prevalence, incidence and polydrug use. This group more than any other age group has proportionally more active users with 11 percent regularly using drugs and an additional seven percent substantially or extensively using drugs. These proportions are significantly higher than the statewide averages for all ages of four percent and three percent, respectively. In addition, a high percentage (28%) of young adults are prior drug users (i.e., those who have not used drugs during the past six months, but used at least one drug prior to that time). The most popular drug, marijuana, has been recently used by 32 percent of these young adults. Cocaine use is also widespread among young adults. Eleven percent of the state's residents aged 18 to 24, have recently used cocaine; six percent in this age group started using cocaine during the past year. Initiation of stimulant use is also highest among the 18 to 24 year olds with one in every

DIVISION OF SUBSTANCE ABUSE SERVICES

Table 6. LEVEL OF SUBSTANCE USE[a] AMONG THE HOUSEHOLD POPULATION IN NEW YORK STATE BY AGE
14,256,000 Household Residents - Spring 1981

	Total		12 - 17		18- 24		25 - 34		35 +	
	N	%	N	%	N	%	N	%	N	%
Total	14,256,000	100	1,801,000	100	1,972,000	100	2,734,000	100	7,749,000	100
No Use	9,766,000	68	1,300,000	72	733,000	37	1,241,000	45	6,492,000	84
Prior Use	2,413,000	17	128,000	7	550,000	28	862,000	32	873,000	11
Infrequent Use	1,201,000	8	240,000	13	343,000	17	310,000	11	308,000	4
Regular Use	518,000	4	81,000	5	215,000	11	185,000	7	37,000	1
Substantial Use	249,000	2	16,000	1	90,000	5	104,000	4	32,000	*%
Extensive Use	109,000	1	37,000	2	33,000	2	32,000	1	7,000	*%

Example of How to Read the Table: Among responding household residents, aged 12 through 17, 128,000 or 7% are prior users.

*% Less than 0.5%. **Less than 500.

[a]Level of substance use or substance use hierarchy is a classification of household residents which reflects the history and recency of drug use as well as the extent and frequency of use (see detailed explanations, p.12).

DIVISION OF SUBSTANCE ABUSE SERVICES

Table 7. RECENT USE[a] OF SUBSTANCES AMONG THE HOUSEHOLD POPULATION IN NEW YORK STATE BY AGE
14,256,000 Household Residents - Spring 1981

Type of Substance[b]	Total		12 - 17		18 - 24		25 - 34		35 +	
	N	%	N	%	N	%	N	%	N	%
Marijuana	1,724,000	12	335,000	19	637,000	32	650,000	20	202,000	3
Cocaine	477,000	3	46,000	3	218,000	11	160,000	5	63,000	1
PCP (Angel Dust)	21,000	*%	8,000	*%	9,000	*%	4,000	*%	**	*%
Hallucinogens	85,000	1	26,000	1	47,000	2	12,000	*%	**	*%
Inhalants	64,000	*%	23,000	1	13,000	1	13,000	1	15,000	*%
Heroin	28,000	*%	**	*%	12,000	1	16,000	1	1,000	*%
Methadone (Illicit)	12,000	*%	**	*%	**	*%	12,000	*%	**	*%
Tranquilizers[c]	172,000	1	40,000	2	33,000	2	63,000	2	36,000	*%
Sedatives[c]	182,000	1	65,000	4	59,000	3	40,000	1	18,000	*%
Stimulants[c]	481,000	3	90,000	5	209,000	11	103,000	4	79,000	1
Anti-Depressants[c]	32,000	*%	23,000	1	1,000	*%	3,000	*%	5,000	*%
Analgesics[c]	110,000	1	40,000	2	34,000	2	35,000	1	1,000	*%
Cough Medicine with Codeine[c]	98,000	1	14,000	1	11,000	1	13,000	*%	60,000	1

Example of How to Read the Table: Among responding household residents aged 12 through 17, 335,000 or 19% have used marijuana at least once in the past six months.

Note: The numbers reported in the table are low estimates since they do not include the non-respondents.

*% Less than 0.5%. **Less than 500.

[a]Recent use refers to use in the six months prior to the survey.
[b]Hallucinogens such as LSD, mescaline and psilocybin; inhalants such as glue/solvents, sprays, nitrous oxide and Amyl Nitrite; tranquilizers such as Valium and Librium; sedatives such as barbiturates and methaqualone; stimulants such as amphetamines and diet pills; anti-depressants such as Elavil and Imipramine; analgesics such as Demerol and Darvon.
[c]Refers only to the nonmedical use of prescription drugs, defined as use other than according to a physician's direction (i.e., in amounts beyond the prescribed dose and/or obtained from a nonmedical source).

twenty starting stimulant use during the last year (97,000 or five percent of this age group). Young adults are also more involved in polydrug use. The table below shows the contrast between the use rates for the total state population and those between the ages of 18 and 24. The rates of combinational use among young adults are considerably higher than those for the total population. In contrast, the other age groups are less inclined to engage in this hazardous form of substance use.

	Total Population: 12 years and older		Young Adults: 18-24	
Selected Combinations of Drugs	N	%	N	%
Marijuana and Alcohol	1,352,000	9	547,000	28
Cocaine and Marijuana	325,000	2	150,000	8
Stimulants and Marijuana	192,000	1	68,000	3
Cocaine and Alcohol	264,000	2	127,000	6
Stimulants and Alcohol	203,000	1	80,000	4

Nonmedical use of drugs by adults between 25 and 34 years of age is high, although not so high as drug use among young adults. Seven percent regularly use drugs and five percent are substantial or extensive users of drugs in this age group. In addition, many of these adults have discontinued use of drugs either temporarily or permanently. This is indicated by the finding that 32 percent are prior drug users. With respect to specific drug use, 20 percent of

residents within the ages of 25 and 34 recently used marijuana, five percent recently used cocaine and four percent recently used stimulants. In contrast to young adults, there are fewer new users among the 25 to 34 year olds. The drug with the highest incidence for these older adults is stimulants (54,000 or two percent of this age group). Polydrug use by residents between 25 and 34 years old is less than that for young adults on all drug combinations queried. Thus, the prevalence of recent marijuana, cocaine and stimulant use among adults between 25 and 34 years old is relatively high; however, the incidence of new drug use and polydrug use is relatively low compared to young adults in New York State.

Drug use among adolescents (aged 12 through 17) presents a different pattern of prevalence, incidence and polydrug use. Among adolescents, regular use of drugs (five percent) and substantial and extensive use (three percent) are lower than the comparable percentages for young adults and adults between 25 and 34. However, 13 percent of the adolescents are infrequent users of drugs, the second highest percentage of infrequent use among the age groups. In addition, adolescents, similar to young adults, tend to use a variety of drugs. The most popular substances recently used by adolescents are marijuana (19 percent), stimulants (5 percent) and sedatives (4 percent). The incidence of new drug use among adolescents was high for selected substances. Seven percent of the adolescents started marijuana use during the past year, the highest percentage of new marijuana users among the age groups; three percent started stimulant use during the last year, the second highest percentage of new stimulant users among the age groups; and two percent are new users of sedatives, the highest percentage of new use among the age groups. Polydrug use by adolescents is similar to that of adults between 25

and 34 with the exception of combinations involving cocaine, a drug not popular with adolescents. These findings are suggestive of a pattern of drug experimentation among adolescents; drug use is infrequent, many types of drugs are used (with the notable exception of expensive drugs such as cocaine), the incidence of new drug use is high and polydrug use is relatively high.

Drug use is lowest among those 35 years and older. This age group has the largest percentage of persons who have never used drugs (84 percent), and 11 percent are prior drug users. Marijuana was recently used by three percent of the adults 35 and older, and stimulants were recently used by one percent of this age group. The incidence of new drug use and polydrug use is well below comparable statewide figures and is the lowest among all age groups.

B. Drug Use by Sex

Drug use varies somewhat by sex. Men generally are involved in more serious forms of drug abuse than are women. For example, four percent of men (240,000) are using at substantial and extensive levels, suggesting dependency, as compared to two percent of women (118,000). Considering recent use, men are more likely than women to use the popular drugs such as marijuana (15 percent vs. nine percent) and cocaine (five percent vs. two percent). Men are also far more inclined than women to use drugs together with alcohol (e.g., 12 percent vs. seven percent use marijuana with alcohol).

The initiation of drug use by men and women varies by the substance involved. While more men than women began using stimulants during the past year (149,000 males and 122,000 females), far more women than men began using marijuana (153,000 vs. 88,000). Although more men than women are using cocaine, the number of new users during the past year is about equal for both sexes.

The survey found no consistent evidence that prescription drug misuse is more common among women than among men. For example, while more women are recent nonmedical users of tranquilizers than are men (95,000 vs. 77,000), more men recently used sedatives nonmedically (109,000 vs. 73,000), and more men take tranquilizers or sedatives while drinking (88,000 vs. 41,000).

C. Drug Use by Ethnicity

Differences in drug preferences and drug use patterns between ethnic groups have diminished in recent years, especially when the population at large is considered.*

In the past, use of marijuana, cocaine and heroin was most popular among blacks, and the nonmedical use of prescription drugs was most popular among whites. The present survey shows that this pattern only holds for recent use. In the six months prior to the survey, five percent of blacks have used cocaine (97,000) and 15 percent have used marijuana (279,000) compared to three percent of whites who have used cocaine (344,000) and 12 percent who have used marijuana (1,277,000). On the other hand, four percent of whites (418,000) have used legal stimulants nonmedically, compared to two percent of blacks (32,000). Generally, recent substance use among Hispanics is either lower: two percent for cocaine (30,000), 10 percent for marijuana (147,000) and two percent for stimulants (20,000).

The tendency to use combinations of drugs shows even smaller differences between the ethnic groups. A slight preponderance of cocaine use can be seen among blacks (three percent use marijuana with cocaine vs. two percent for whites), while whites show more combinational stimulant use (two percent use stimulants with alcohol vs. less than one-half of one percent for blacks).

*See New York State Division of Substance Abuse Services, "Drug Use Among College Students in New York State," for differences among ethnic groups.

When levels of the substance use hierarchy are considered, some ethnic differences appear. Whereas two percent of whites and Hispanics are substantial and extensive users, more than three percent of blacks use at these serious levels.

The strongest evidence for the disappearance of ethnic differences in drug use patterns among the general household population is seen in the findings for new use during the past year. Each of the various drugs has attracted a similar proportion of new users among whites, blacks, Hispanics and other minority groups.

D. Drug Use by Employment Status and Income

When drug use rates are analyzed by employment status, there are generally few and minor differences among the full-time employed, the part-time employed and the unemployed. Employment status, however, does appear to be related to cocaine use among adults ages 18 to 34 with the full-time employed showing the highest rates.

Other areas of drug use explored in this survey, such as use of prescription drugs or dysfunctionality as a result of using, do not show any consistent differences between the full-time employed and the remainder of the population.

Although there was little relationship between employment status of the respondent and drug use, examination of the total gross income of the respondent's household and drug use did reveal important findings. For the purpose of this analysis, households were separated into four income categories: below $15,000, $15,000-$24,999, $25,000-$49,999 and $50,000 and above.

A major finding of the survey is that there is proportionally more drug use in households reporting incomes of $50,000 and above than there is in households of any other income category. Within the drug use hierarchy categories (see Section II. D) the proportion of respondents from households with incomes of $50,000 and above using drugs regularly was identical to the statewide proportion of regular users (four percent). Substantial and extensive use of drugs by these wealthier households, however, was noticeably higher (six percent) than the statewide figures for substantial and extensive drug use (three percent) and higher than comparable figures for the other income categories. Respondents from households with incomes of $50,000 and above also reported more prior drug use than respondents in any other income category (25 percent vs. 17 percent statewide).

Twenty percent of the respondents from households with incomes of $50,000 and above were involved in recent use of marijuana, and seven percent were involved in recent use of cocaine. As displayed below, these percentages for recent substance use are significantly higher than statewide figures and comparable figures for the other income categories. Finally combinational use of drugs was found to be higher in households of $50,000 and above compared to households of lower income. Other indices of drug use, such as incidence of new drug use, varied only slightly across income categories and were similar to statewide figures.

Recent Use of Selected Substances Among the Household Population in New York State by Income

	Less than $15,000		$15,000-$24,999		$25,000-$49,999		$50,000 and above		Total	
	N	%	N	%	N	%	N	%	N	%
Marijuana	643,000	13	418,000	10	483,000	13	162,000	20	1,706,000	13
Cocaine	158,000	3	106,000	3	153,000	4	56,000	7	473,000	4
Stimulants	132,000	3	157,000	4	141,000	4	47,000	6	477,000	4

E. Drug Use by Region in the State

Regional differences in drug use rates are generally minor. Whether householders reside in New York City, suburban New York City,* upstate urban counties having central cities of 100,000 or more,** or the remaining counties of the state, the drugs of greatest popularity are marijuana, cocaine and stimulants. As for the levels of serious drug use (Table 8) the first three regions cited above each have about three percent of the population who are substantial or extensive drug users. The remaining counties in the state have a somewhat smaller proportion of serious drug users: two percent are substantial or extensive drug users.

The following section describes drug use rates in each of the four regions and compares them to the state totals and to the other regions.

New York City (Table 9)

Although marijuana is clearly the substance that has been used by more New York City residents than any other (27 percent), two drugs occupy the second place of choice -- cocaine and stimulants. Seven percent of New Yorkers have used stimulants and five percent have used cocaine in their lifetime. In the past six months, however, three percent have used stimulants and the same proportion have used cocaine; in the 30 days prior to the survey two percent have used stimulants and cocaine. The drugs that follow in popularity are tranquilizers and sedatives, with two percent and one percent of the population, respectively, using these drugs in the past six months.

*Nassau, Suffolk, Westchester and Rockland Counties.
**Erie County, with Buffalo; Monroe County, with Rochester; Onondaga County, with Syracuse; and, Albany County, with Albany.

DIVISION OF SUBSTANCE ABUSE SERVICES

Table 8. LEVEL OF SUBSTANCE USE[a] AMONG THE HOUSEHOLD POPULATION IN NEW YORK STATE BY REGION
14,256,000 Household Residents - Spring 1981

	Total		New York City		Suburban New York City[b]		Upstate Urban Counties[c]		Other Counties[d]	
	N	%	N	%	N	%	N	%	N	%
Total	14,256,000	100	5,753,000	100	3,102,000	100	1,999,000	100	3,402,000	100
No Use	9,766,000	68	3,900,000	68	2,010,000	65	1,366,000	68	2,490,000	73
Prior Use	2,413,000	17	948,000	16	619,000	20	330,000	17	516,000	15
Infrequent Use	1,201,000	8	524,000	9	268,000	9	189,000	9	220,000	7
Regular Use	510,000	4	220,000	4	121,000	4	61,000	3	116,000	3
Substantial Use	249,000	2	102,000	2	72,000	2	31,000	2	44,000	1
Extensive Use	109,000	1	59,000	1	12,000	*%	22,000	1	16,000	1

Example of How to Read the Table: Among responding household residents in New York City, 948,000 or 16% are prior users.

*% Less than 0.5%. **Less than 500.

[a]Level of substance use or substance use hierarchy is a classification of household residents which reflects the history and recency of drug use as well as the extent and frequency of use (see detailed explanations, p.12).
[b]Suburban New York City includes the Counties of Nassau, Suffolk, Westchester and Rockland.
[c]Upstate Urban Counties include Albany, Erie, Monroe and Onondaga.
[d]Non-Urban Counties include New York State counties exclusive of those in New York City and the Counties of Nassau, Suffolk, Westchester, Rockland, Albany, Erie, Monroe and Onondaga.

DIVISION OF SUBSTANCE ABUSE SERVICES
Table 9. SUBSTANCE ABUSE AMONG THE HOUSEHOLD POPULATION IN NEW YORK CITY
5,753,000 Household Residents - Spring 1981

Type of Substance[a]	Never Used		Lifetime Use (Used at Least Once)		Response Unknown	Recent Use (Used in Past Six Months)		Current Use (Used in Past 30 Days)	
	N	%	N	%	N	N	%	N	%
Marijuana	4,180,000	73	1,573,000	27	**	752, 000	13	589,000	10
Cocaine	5,372,000	93	378,000	7	**	250,000	4	129,000	2
PCP (Angel Dust)	5,670,000	99	80,000	1	3,000	13,000	*%	5,000	*%
Hallucinogens	5,554,000	97	187,000	3	12,000	37,000	1	17,000	*%
Inhalants	5,607,000	97	146,000	3	**	36,000	1	19,000	*%
Heroin	(c)		(c)		(c)	(c)		(c)	
Methadone (Illicit)	5,712,000	99	41,000	1	**	10,000	*%	1,000	*%
Tranquilizers[b]	5,558,000	97	195,000	3	**	94,000	2	62,000	1
Sedatives[b]	5,560,000	97	190,000	3	3,000	62,000	1	62,000	1
Stimulants[b]	5,377,000	93	376,000	7	**	161,000	3	101,000	2
Anti-Depressants[b]	5,745,000	99	8,000	*%	**	5,000	*%	2,000	*%
Analgesics[b]	5,589,000	98	137,000	2	27,000	33,000	1	22,000	*%
Cough-Medicine with Codeine[b]	5,515,000	96	227,000	4	11,000	23,000	*%	2,000	*%

Example of How to Read the Table: Among responding household residents in New York City, 1,573,000 or 27% have used marijuana at least once.

Note: The numbers reported in the table are low estimates since they do not include the non-respondents.

*% Less than 0.5%. ** Less than 500.

[a]Hallucinogens such as LSD, mescaline and psilocybin; inhalants such as glue/solvents, sprays, nitrous oxide and Amyl Nitrite; tranquilizers such as Valium and Librium; sedatives such as barbiturates and methaqualone; stimulants such as amphetamines and diet pills; anti-depressants such as Elavil and Imipramine; analgesics such as Demerol and Darvon.
[b]Refers only to the nonmedical use of prescription drugs, defined as use other than according to a physician's direction (i.e., in amounts beyond the prescribed dose and/or obtained from a nonmedical source).
[c]Regional findings for heroin prevalence are numerically unstable and are therefore omitted from the table.

Compared to overall state figures, New York City residents have rates of drug use that are generally higher for the recent use of marijuana, cocaine, inhalants and tranquilizers, and similar rates for the remaining drugs.

Compared to the other regions in the state, New York City drug use rates are most similar to those in the suburban New York City counties. For instance, recent use rates for cocaine (four percent), hallucinogens (one percent), and analgesics (one percent) are identical. The ranking of nonmedical use of prescription drugs, however, differs. Although stimulants are first in both regions, tranquilizer use exceeds sedative use for New York City residents and the reverse is true for suburban New Yorkers.

Suburban New York City Counties* (Table 10)

About 31 percent of these suburban New York City residents have used marijuana in their lifetime. Cocaine and stimulants used nonmedically are almost equal in rates of use. In the past six months, for instance, four percent of the residents have used cocaine and four percent have also used stimulants. Sedatives and cough medicine with codeine, follow in popularity.

*Nassau, Suffolk, Westchester and Rockland counties.

DIVISION OF SUBSTANCE ABUSE SERVICES

Table 10. SUBSTANCE ABUSE AMONG THE HOUSEHOLD POPULATION IN SUBURBAN NEW YORK CITY[a]
3,102,000 Household Residents - Spring 1981

Type of Substance[b]	Never Used		Lifetime Use (Used at Least Once)		Response Unknown	Recent Use (Used in Past Six Months)		Current Use (Used in Past 30 Days)	
	N	%	N	%	N	N	%	N	%
Marijuana	2,125,000	69	956,000	31	21,000	305,000	12	270,000	9
Cocaine	2,921,000	94	181,000	6	**	110,000	4	61,000	2
PCP (Angel Dust)	3,055,000	98	47,000	2	**	4,000	*%	**	*%
Hallucinogens	3,004,000	97	98,000	3	**	33,000	1	13,000	*%
Inhalants	3,053,000	98	49,000	2	**	13,000	*%	13,000	*%
Heroin	(d)		(d)		(d)	(d)		(d)	
Methadone (Illicit)	3,006,000	99	16,000	1	**	2,000	*%	**	*%
Tranquilizers[c]	2,989,000	96	113,000	4	**	16,000	1	2,000	*%
Sedatives[c]	2,979,000	96	122,000	4	1,000	49,000	2	8,000	*%
Stimulants[c]	2,070,000	93	232,000	7	**	113,000	4	42,000	1
Anti-Depressants[c]	3,008,000	99	14,000	1	**	**	*%	**	*%
Analgesics[c]	3,012,000	97	90,000	3	**	24,000	1	3,000	*%
Cough Medicine with Codeine[c]	2,995,000	97	107,000	3	**	64,000	2	**	*%

Example of How to Read the Table: Among responding household residents in Suburban New York City, 956,000 or 31% have used marijuana at least once.

Note: The numbers reported in the table are low estimates since they do not include the non-respondents.

*% Less than 0.5%. **Less than 600.

[a]Includes the Counties of Nassau, Suffolk, Westchester and Rockland.
[b]Hallucinogens such as LSD, mescaline and psilocybin; inhalants such as glue/solvents, sprays, nitrous oxide and Amyl Nitrite; tranquilizers such as Valium and Librium; sedatives such as barbiturates and methaqualone; stimulants such as amphetamines and diet pills; anti-depressants such as Elavil and Imipramine; analgesics such as Demerol and Darvon.
[c]Refers only to the nonmedical use of prescription drugs, defined as use other than according to a physician's direction (i.e., in amounts beyond the prescribed dose and/or obtained from a nonmedical source).
[d]Regional findings for heroin prevalence are numerically unstable and are therefore omitted from the table.

Generally, suburban New York City residents have higher drug use rates than the state as a whole. For instance, in the six months prior to the survey, the use rates for cocaine (four percent), stimulants (four percent), sedatives (two percent), and cough medicine with codeine (two percent) were higher than the state, while rates for other substances were about the same.

As stated above, New York City and suburban New York City generally resemble each other in rates of drug use. The nonmedical use of prescription drugs, however, may be somewhat more popular among suburban residents.

Upstate Urban Counties* (Table 11)

About 26 percent of residents in the four upstate urban counties have used marijuana. Clearly stimulants constitute the second drug category of choice with seven percent using in lifetime, four percent using in the past six months, and three percent using in the past 30 days. Prescription drugs -- especialy tranquilizers and sedatives -- and cocaine are the next leading drugs.

Compared to state totals, these four urban counties have higher recent use rates for marijuana (13 percent vs. 12 percent) stimulants (four percent vs. three percent),sedatives and tranquilizers (each, two percent vs. one percent), but lower rates for cocaine use (two percent vs. three percent). Interestingly, the upstate urban counties have higher lifetime use rates for tranquilizers (six percent vs. four percent) and higher current use rates for stimulants (three percent vs. two percent).

*Erie, Monroe, Onondaga and Albany Counties.

DIVISION OF SUBSTANCE ABUSE SERVICES

Table 11. SUBSTANCE ABUSE AMONG THE HOUSEHOLD POPULATION IN URBAN COUNTIES OF UPSTATE NEW YORK[a]
1,999,000 Household Residents - Spring 1981

Type of Substance[b]	Never Used		Lifetime Use (Used at Least Once)		Response Unknown	Recent Use (Used in Past Six Months)		Current Use (Used in Past 30 Days)	
	N	%	N	%	N	N	%	N	%
Marijuana	1,472,000	74	527,000	26	**	263,000	13	201,000	10
Cocaine	1,928,000	97	68,000	3	3,000	40,000	2	22,000	1
PCP (Angel Dust)	1,974,000	99	22,000	1	3,000	**	*%	**	*%
Hallucinogens	1,933,000	97	66,000	3	**	9,000	*%	7,000	*%
Inhalants	1,982,000	99	17,000	1	**	3,000	*%	**	*%
Heroin	(d)		(d)		(d)	(d)		(d)	
Methadone (Illicit)	1,998,000	99	1,000	*%	**	**	*%	**	*%
Tranquillizers[c]	1,871,000	94	128,000	6	**	34,000	2	25,000	1
Sedatives[c]	1,927,000	96	72,000	4	**	41,000	2	26,000	1
Stimulants[c]	1,855,000	93	140,000	7	4,000	76,000	4	60,000	3
Anti-Depressants[c]	1,977,000	99	22,000	1	**	22,000	1	21,000	1
Analgesics[c]	1,913,000	96	73,000	4	13,000	21,000	1	8,000	*%
Cough Medicine with Codeine[c]	1,923,000	96	76,000	4	**	7,000	*%	**	*%

Example of How to Read the Table: Among responding household residents, 527,000 or 26% have used marijuana at least once.

Note: The numbers reported in the table are low estimates since they do not include the non-respondents.

*% Less than 0.5%. **Less than 500.

[a]Upstate Counties include Albany, Erie, Monroe and Onondaga.
[b]Hallucinogens such as LSD, mescaline and psilocybin; inhalants such as glue/solvents, sprays, nitrous oxide and Amyl Nitrite; tranquillizers such as Valium and Librium; sedatives such as barbiturates and methaqualone; stimulants such as amphetamines and diet pills; anti-depressants such as Elavil and Imipramine; analgesics such as Demerol and Darvon.
[c]Refers only to the nonmedical use of prescription drugs, defined as use other than according to a physician's direction (i.e., in amounts beyond the prescribed dose and/or obtained from a nonmedical source).
[d]Regional findings for heroin prevalence are numerically unstable and are therefore omitted from the table.

Relative to the other regions, these urban counties are in some ways like the suburban New York City counties and in some ways like the other non-New York City counties. Similar to suburban New York City is the high nonmedical use of prescription drugs, and similar to the remaining counties in the state is the low use of cocaine.

The Other Counties of New York State* (Table 12)

In the remaining counties of the state, the drugs of greatest popularity are again marijuana, stimulants and cocaine. The nonmedical use rate for stimulants always exceeds the use of cocaine, whether in lifetime, in the past six months or the 30 days prior to the survey.

When compared to the other regions in the state, this region generally has the lowest use rates in the state, especially in recent use and current use. The exception is the rate of stimulant use, which is as high or higher than New York City.

*Includes New York State Counties exclusive of those in New York City and the Counties of Albany, Erie, Monroe, Nassau, Onondaga, Rockland, Suffolk and Westchester.

DIVISION OF SUBSTANCE ABUSE SERVICES

Table 12. SUBSTANCE ABUSE AMONG THE HOUSEHOLD POPULATION IN OTHER COUNTIES OF NEW YORK STATE[a]
3,402,000 Household Residents - Spring 1981

Type of Substance[b]	Never Used		Lifetime Use (Used at Least Once)		Response Unknown	Recent Use (Used in Past Six Months)		Current Use (Used in Past 30 Days)	
	N	%	N	%	N	N	%	N	%
Marijuana	2,655,000	78	744,000	22	3,000	324,000	10	227,000	7
Cocaine	3,267,000	96	135,000	4	**	77,000	2	44,000	1
PCP (Angel Dust)	3,375,000	99	27,000	1	**	4,000	*%	4,000	*%
Hallucinogens	3,328,000	98	74,000	2	**	6,000	*%	2,000	*%
Inhalants	3,357,000	99	45,000	1	**	12,000	*%	8,000	*%
Heroin	(d)		(d)		(d)	(d)		(d)	
Methadone (Illicit)	3,397,000	99	5,000	*%	**	**	*%	**	*%
Tranquillizers[c]	3,345,000	98	57,000	2	**	28,000	1	8,000	*%
Sedatives[c]	3,296,000	97	100,000	3	6,000	30,000	1	26,000	1
Stimulants[c]	3,120,000	92	282,000	8	**	131,000	4	98,000	3
Anti-Depressants[c]	3,392,000	99	10,000	*%	**	5,000	*%	5,000	*%
Analgesics[c]	3,312,000	97	88,000	3	2,000	32,000	1	26,000	1
Cough Medicine with Codeine[c]	3,267,000	96	135,000	4	**	14,000	*%	**	*%

Example of How to Read the Table: Among responding household residents in the other counties of New York State, 744,000 or 22% have used marijuana at least once.

Note: The numbers reported in the table are low estimates since they do not include the non-respondents.

*% Less than 0.5%. **Less than 500.

[a]Includes New York State Counties exclusive of those in New York City and the Counties of Albany, Erie, Monroe, Nassau, Onondaga, Rockland, Suffolk and Westchester.

[b]Hallucinogens such as LSD, mescaline and psilocybin; inhalants such as glue/solvents, sprays, nitrous oxide and Amyl Nitrite; tranquillizers such as Valium and Librium; sedatives such as barbiturates and methaqualone; stimulants such as amphetamines and diet pills; anti-depressants such as Elavil and Imipramine; analgesics such as Demerol and Darvon.

[c]Refers only to the nonmedical use of prescription drugs, defined as use other than according to a physician's direction (i.e., in amounts beyond the prescribed dose and/or obtained from a nonmedical source).

[d]Regional findings for heroin prevalence are numerically unstable and are therefore omitted from the table.

IV. Drug Use and Problems

This part of the report discusses dysfunctional drug use, especially problems that have resulted from using drugs, drug dependency, and seeking treatment.

A. Problems Associated with Drug Use (Table 13)

This section summarizes problems associated with drug abuse as they were experienced by the user. Questions in the survey addressed pertinent areas of functioning in everyday life as well as physical health. Users were asked whether their drug use ever caused problems in the areas of family, friends, work and school, health, accidents, or the law. Seven percent of the total state population report experiencing one or more problems in these areas as a result of using drugs.

The largest number of users (618,000 or four percent) experience detrimental effects of their drug use in the area of work or school. As many as 381,000 users attribute them to marijuana, 335,000 to misuse of prescription drugs, and 108,000 to illicit drugs other than marijuana.

The second most common type of problem was in relationships with family and friends: 565,000 users (approximately four percent of the population) report having such problems. Marijuana was more often seen as causing such problems than were other illicit drugs or prescription drugs.

Health was another area in which many users experienced problems (443,000 or three percent). Health problems were more often attributed to prescription drugs (236,000 or two percent) and marijuana (231,000 or two percent) than to other illicit drugs (98,000 or one percent).

DIVISION OF SUBSTANCE ABUSE SERVICES
Table 13. PROBLEMS WITH DRUG USE REPORTED AMONG THE HOUSEHOLD POPULATION IN NEW YORK STATE BY AGE
14,256,000 Household Residents - Spring 1981

Type of Problem	Total		12 - 17		18- 24		25 - 34		35 +	
	N	%	N	%	N	%	N	%	N	%
Problems with Family or Friends	565,000	4	90,000	5	211,000	11	184,000	7	72,000	1
Problems with Work or School	618,000	4	93,000	5	258,000	13	197,000	7	70,000	1
Motor Vehicle Accidents	68,000	*%	10,000	1	31,000	2	12,000	*%	5,000	*%
Other Injuries or Accidents	81,000	1	14,000	1	18,000	1	29,000	1	20,000	*%
Problems with Health	443,000	3	52,000	3	122,000	6	175,000	6	94,000	1
Trouble with the Law	197,000	1	36,000	2	52,000	3	83,000	3	26,000	*%

Example of How to Read the Table: Among responding household residents aged 18 through 24, 258,000 or 13% reported problems with work or school because of their drug use.

Note: The numbers reported in the table are low estimates since they do not include the non-respondents.

*% Less than 0.5%. **Less than 500.

About one percent of the population say they have experienced trouble with the law as a result of using drugs (197,000); marijuana receives more mention (130,000) than other illicit drugs (61,000) or prescription drugs (68,000).

The issue of drugs and driving has received much less attention than driving under the influence of alcohol. As many as 729,000 residents or five percent of the state population drove an automobile while feeling the effects of drugs within the six months prior to the survey, and 524,000 residents did so within the month prior to the survey. Less than one-half of one percent of the state residents (58,000) report having had automobile accidents while driving under the influence of drugs, but many of these have had more than one drug related accident. More persons had accidents while using prescription drugs nonmedically (49,000) than when driving under the influence of marijuana (12,000) or other illicit drugs (16,000). Prescription drug misuse also causes more people to be involved in other injuries or accidents (48,000) than does marijuana (29,000) or other illicit drugs (37,000).

While there are generally no important demographic or regional variations in the prevalence of dysfunctional drug use, there are marked differences between age groups. Invariably, young adults (18-24 years old) are most likely to suffer from problems of dysfunctional use. For example, more than one in every ten young adults (258,000) have problems with work or school, and nearly as many have problems with family or friends (211,000). Young adults are also the age group with the highest number of users reporting motor vehicle accidents caused by drug use (31,000). The only areas of dysfunctional drug use in which the 18-24 year old age group does not have highest rates are health, legal problems, and injuries or accidents unrelated to driving. In these areas the 25-34 year old group have equally high rates.

B. Perceptions of Drug Dependence

Drug dependence is a complex phenomenon. It may include physical aspects, such as the appearance of withdrawal symptoms after sudden cessation of drug use. It may also include psychological factors, such as an inability to function without the mood altering effects of a drug.

In the context of this survey, two approaches to drug dependency are used. One is users' own judgment of whether they see themselves as dependent on certain drugs or using them too much. The findings here indicate that two percent of the state's population (288,000) see themselves as dependent on marijuana, other illicit drugs, and/or prescription drugs used nonmedically. This figure does not include drug-dependent persons who use prescription drugs as prescribed, nor does it include persons dependent on alcohol.

The second approach is to consider levels of use as an indicator of dependency, i.e., the extensiveness and frequency of drug use as developed in the drug use hierarchy.* Using this criterion, as many as three percent of the state's household population (358,000) could be seen as dependent on one or more of the drugs mentioned above. While derived from self-reported drug use data, this measure of dependency could be seen as more objective than self-reported dependency.

*See Section II D, Substance Use Hierarchy.

Whether it is self-reported dependency or self-reported drug use , a higher proportion of men are dependent than women. For example, three percent of the men (198,000) say they are dependent, and three percent use drugs at high levels (240,000). Among women, only one percent say they are dependent (90,000) and two percent use at high levels (118,000).

More of the New York City residents see themselves as drug dependent (three percent or 153,000) than do residents in other regions of the state (two percent or less). Regional variations in levels of drug use show minimal differences.

Of the thirteen drugs for which dependency questions were asked, marijuana received the most frequent mention. For example, four percent of the 18-24 year olds (73,000) said they were dependent on marijuana, as did three percent of adolescents (12-17 years old), two percent of males, two percent of blacks, and one percent of each of the four regions in the state*. Almost all subgroups of the population considered in this report have one percent, or less, self-perceived dependency on illicit drugs other than marijuana, or on prescription drugs used nonmedically.

C. Seeking Treatment

Of the 1,024,000 state residents (seven percent) that have experienced problems in one or more areas of everyday-life functioning as a result of using drugs, 111,000 have reported receiving treatment for their drug use. Most of these household residents went to drug treatment programs (38 percent) and to mental health clinics or hospitals (34 percent). The remainder went to private doctors (13 percent), self-help groups (three percent) or other settings (12 percent).

---

*For regional definitions, see III. E. Drug Use by Region in the State.

There are many factors influencing the choice of a treatment setting. Apart from availability in terms of physical location and cost of services, attitudes toward treatment services and settings vary. As many as 98 percent of the state's population stated that they would seek some form of treatment if they had a drug problem and needed help. This high degree of willingness to seek help is certainly based on a hypothetical question; however, users and nonusers alike are willing to consider treatment.

There are marked differences in the treatment modalities or treatment settings that people prefer. As many as 53 percent of the population would prefer to go to a private doctor or other private individual treatment. Self-help groups are the treatment of choice for 19 percent, while 16 percent prefer mental health clinics or hospitals, and 12 percent would prefer drug treatment programs.

The private office is the most desirable treatment setting for nonusers and users alike, irrespective of the types of drugs used or the levels of use. Self-help groups are clearly more attractive to users than to nonusers; 31 percent of recent users (vs. 17 percent of nonusers) would seek this treatment over any other modality or setting. Users on the other hand would be less inclined to go to hospitals or mental health clinics; eight percent of recent users would prefer this type of setting, compared to 18 percent of nonusers. Drug programs receive first choice from 10 percent of recent users and 12 percent of nonusers.

APPENDIX

A. Methodology

Sampling

The Division of Substance Abuse Services contracted with Chilton Research Services to generate the sample and to conduct the telephone survey from its computer-assisted telephone installation in Radnor, Pennsylvania. The target population for the study was all persons 12 years of age or older residing in telephone households in New York State.* The sampling took place in three stages. First, the approximately 2,000 telephone exchanges in New York State were sampled in order to achieve an appropriate regional distribution throughout the state. In order to assure that separate estimation could be obtained for the several Health Service Areas in the state and for the major upstate cities, the state was stratified into 13 areas.

The second stage in sampling involved the selection of households within each of the selected telephone exchanges. A computer-based random digit dialing system generated a list of four-digit combinations within each of the selected telephone exchanges in proportion to the number of households served by the exchange. Thus, each household within any geographic stratum had the same probability of selection (except for households with multiple telephone numbers).

The final stage of sampling was selecting the actual respondent within the household. During the initial telephone conversation with a member of the household and with the aid of a screening questionnaire, the interviewer listed the age and sex of all eligible respondents in the household (i.e., those aged 12 and older). A computer-generated random selection process determined the respondent to be interviewed. The major criterion was age:

---

*A subgroup of the non-telephone household population--the occupants of single room occupancy hotels (SROs) in New York City--was also studied through a special effort. Although they will be included in this report, a special analysis of this group will be done in a later report.

respondents in the youngest age groups (12 through 17 and 18 through 39) had the greatest probability of being selected. The eventual weighting of the sample, however, reflected the different selection probabilities associated with the sampling design and the distribution of the demographic characteristics of age, sex, race, education and region estimated for the state population.*

The Questionnaire

The questionnaire probed the use of a variety of illegal and prescription drugs. Although the distinction between medical use (i.e., use of a drug as prescribed by a physician or dentist) and nonmedical use was made, and both types of use were queried, this report will focus only on the nonmedical use of drugs.

Drug use among residents was measured in several different ways:

lifetime use: the number of people who have used a drug at least once in their lifetime;

recent use: the number of people who have used a drug at least once in the six months prior to the survey;

current use: the number of people who have used a drug at least once in the 30 days prior to the survey;

frequency: for the people who have used a drug in the past 30 days, the number of days on which the drug was used;

polydrug use: the number of people who have used two or more substances within the past six months with the result that the substances affected them at the same time;

incidence: the number of new users, defined as the number of people who have used a drug for the first time since January 1980.

*Since detailed 1980 census data were not available at the time of writing, demographic estimates were drawn from: U.S. Bureau of the Census, "Population and Households by States and Counties: 1980," and "Supplementary Report on Age, Sex, Race and Spanish Origin of the Population by Regions, Divisions and States: 1980"; New York State Economic Development Board, "1978 Official Population Projections for New York State Counties".

In addition, questions were asked about the impact of drug usage on job or school performance. A final set of questions dealt with the desire for treatment and the kinds of treatment services preferred.

The questionnaire was programmed into the Chilton Research computer-assisted telephone interviewing system, which facilitated the administration of the questionnaire and the analysis of the responses. Each interview was conducted by a professional interviewer and took approximately 30 minutes to administer.

Data Collection Procedures

A total of 3,487 respondents participated in the survey. All respondents received at least one phone call and as many as five callbacks at varying times of the day and days of the week to elicit cooperation and to seek a convenient time for the interview.

Safeguards were employed at every phase of the study to insure the confidentiality of all respondents and their answers. Although respondents were compensated for the time in completing the interview either by receiving a check or having money sent to a charity of their choice, all identifying information was removed from the data tapes.

B. Limitations of the Data

Given the nature of surveys generally and telephone surveys in particular, certain limitations in interpreting findings must be kept in mind. First, survey research on nonmedical drug use usually yields conservative results.

Since surveys usually depend on self-reported behavior, and drug-taking is socially stigmatized and associated with legal sanctions, prevalence figures estimated from surveys are considered conservative. Interestingly, in surveys of alcohol use, where the inhibiting factors of social stigma and legal sanctions are considerably diminished compared to those associated with nonmedical drug use, it was found that respondents underreported rates of alcohol consumption by 40 percent or more.*

A second limitation concerns the fact that the population universe for the survey are residents of households. Consequently, people could not be included if they were in the armed forces, hospitals, prisons or residential drug treatment programs, or if they were living on college campuses, in boarding houses, convalescent homes and the like. Furthermore, people who are rarely home had little chance to be interviewed. Previous studies of drug use from sources such as police records and emergency room intake reports indicate that these people are more likely to have used drugs than are household residents.

Third, household surveys are extremely unreliable in yielding estimates of heroin use. The limitations cited above have a particular impact on findings for heroin. Because of strong legal sanctions and the lack of social acceptance, respondents are most reluctant to admit its use. Moreover, the universe of household residents and those available for interviewing are least likely to include heroin users.

Fourth, for this survey the household universe was further restricted to households having telephones. Nationally, more than 90 percent of households have telephones, but in New York City only 83 percent of the households have telephones.** Although a small sample of non-telephone households in New York

---

*See Sheila Blume, "National Patterns of Alcohol Use and Abuse," Research Developments In Drug And Alcohol Use, R. Millman, P. Cushman, Jr. and J. Lowinson, eds.

**Crossley Surveys, Inc., "Telephone Incidence."

City (236 SRO respondents) was included, it is not clear what bias is introduced by generally omitting the non-telephone households. A recent study indicates that New York City residents at the lowest end of the income scale, those with the least education, and those that are the youngest are most likely to be without telephones. To the extent that these characteristics are associated with drug-taking behavior, findings will be biased, and it is not always clear in what direction.

Finally, since youth aged 12 through 17 needed parental permission before participating in the survey, prevalence estimates for this age group may be particularly conservative. This obstacle to participation may have acted as a biasing factor and may have interfered with the candor of youthful respondents, especially if parents were present at the time of the interview.

Thus, in interpreting the findings, these several limitations should be kept in mind. In general, the limitations point to an underestimate of prevalence and incidence of nonmedical drug use in New York State.